

Label (See page 18.) Use the IRS label. Otherwise, please print or type.	L A B E L H E R E	Your first name and initial TEST P	Last name BARRELL	OMB No. 1545-0074	
		If a joint return, spouse's first name and initial	Last name	Your social security number 400-00-5209	
		Home address (number and street). If you have a P.O. box, see page 18. C/O BROTHER BARRELL 25000 HAM AND BACON JUNCTION		Apt. no.	Spouse's social security number
		City, town or post office, state, and ZIP code. If you have a foreign address, see page 18. PIG TOWN UT 84013		You must enter your SSN(s) above.	
Presidential Election Campaign <input type="checkbox"/> Check here if you, or your spouse if filing jointly, want \$3 to go to this fund (see page 18)					

Filing status Check only one box.	1 <input type="checkbox"/> Single	4 <input type="checkbox"/> Head of household (with qualifying person). (See page 19.) If the qualifying person is a child but not your dependent, enter this child's name here.
	2 <input type="checkbox"/> Married filing jointly (even if only one had income)	
	3 <input type="checkbox"/> Married filing separately. Enter spouse's SSN above and full name here. <input type="checkbox"/>	5 <input checked="" type="checkbox"/> Qualifying widow(er) with dependent child (see page 19)

2003				
Exemptions If more than six dependents, see page 20.	6 a <input checked="" type="checkbox"/> Yourself. If someone can claim you as a dependent, do not check box 6a.			
	b <input type="checkbox"/> Spouse			
	c Dependents:			
	(1) First name ROLAND	Last name BARRELL	(2) Dependent's social security number 400-55-3006	(3) Dependent's relationship to you FOSTERCHILD
	(4) Check if qualifying child for child tax credit (see pg. 21)			
	(4) Check if qualifying child for child tax credit (see pg. 21)			
d Total number of exemptions claimed.				

Income Attach Form(s) W-2 here. Also attach Form(s) 1099-R if tax was withheld. If you did not get a W-2, see page 22. Enclose, but do not attach, any payment.	7	Wages, salaries, tips, etc. Attach Form(s) W-2.	7
	8 a	Taxable interest. Attach Schedule 1 if required.	10,000
	b	Tax-exempt interest. Do not include on line 8a.	8b
	9 a	Ordinary dividends. Attach Schedule 1 if required.	9a
	b	Qualified dividends (see page 23).	9b
	10	Capital gain distributions (see page 23).	10
	11 a	IRA distributions.	11a
	11 b	Taxable amount (see page 23).	2,500
	12 a	Pensions and annuities.	12a
	12 b	Taxable amount (see page 24).	4,920
13	Unemployment compensation and Alaska Permanent Fund dividends.	13	
14 a	Social security benefits.	14a	
14 b	Taxable amount (see page 26).	14b	
15	Add lines 7 through 14b (far right column). This is your total income .	15	17,420
Adjusted gross income	16	Educator expenses (see page 26).	16
	17	IRA deduction (see page 26).	17
	18	Student loan interest deduction (see page 29).	18
	19	Tuition and fees deduction (see page 29).	19
	20	Add lines 16 through 19. These are your total adjustments .	20
21	Subtract line 20 from line 15. This is your adjusted gross income .	21	17,420

Name(s) shown on page 1

Your social security number

TEST P BARRELL**400-00-5209****Tax, credits, and payments**22 Enter the amount from line 21 (adjusted gross income). 22 **17,420**23a Check ☒ You were born before January 2, 1941, ☐ Blind } Total boxes checked ▶ 23a **1**
if: ☐ Spouse was born before January 2, 1941, ☐ Blind }b If you are married filing separately and your spouse itemizes deductions, see page 30 and check here ▶ 23b ☐24 Enter your **standard deduction** (see left margin). 24 **11,000**25 Subtract line 24 from line 22. If line 24 is more than line 22, enter -0-. 25 **6,420**26 If line 22 is over \$109,475, or you provided housing to a person displaced by Hurricane Katrina, see page 34. Otherwise, multiply \$3,200 by the total number of exemptions claimed on line 6d. 26 **6,400**27 Subtract line 26 from line 25. If line 26 is more than line 25, enter -0-. This is your **taxable income**. ▶ 27 **20**28 **Tax**, including any alternative minimum tax (see page 31). 28 **2**

29 Credit for child and dependent care expenses.

Attach Schedule 2. 29

30 Credit for the elderly or the disabled. Attach

Schedule 3. 30 **1**

31 Education credits. Attach Form 8863. 31

32 Retirement savings contributions credit. Attach

Form 8880. 32

33 Child tax credit (see page 36). Attach

Form 8901 if required. 33

34 Adoption credit. Attach Form 8839. 34

35 Add lines 29 through 34. These are your **total credits**. 35 **1**36 Subtract line 35 from line 28. If line 35 is more than line 28, enter -0-. 36 **1**

37 Advance earned income credit payments from Form(s) W-2. 37

38 Add lines 36 and 37. This is your **total tax**. ▶ 38 **1**39 Federal income tax withheld from Forms W-2 and 1099. 39 **200** **FORM 1099**40 2005 estimated tax payments and amount applied from 2004 return. 40 **500**41a **Earned income credit (EIC)**. 41a

b Nontaxable combat pay election. 41b

42 Additional child tax credit. Attach Form 8812. 42

43 Add lines 39, 40, 41a, and 42. These are your **total payments**. ▶ 43 **700****Refund**

Direct deposit? See page 10 and fill in 45b, 45c, and 45d.

44 If line 43 is more than line 38, subtract line 38 from line 43. This is the amount you **overpaid**. 44 **699**45a Amount of line 44 you want **refunded to you**. ▶ 45a **574**▶ b Routing number ☒ ☒ ☒ ☒ ☒ ☒ ☒ ☒ ☒ ☒ ▶ c Type: ☐ Checking ☐ Savings▶ d Account number ☒ ☒ ☒ ☒ ☒ ☒ ☒ ☒ ☒ ☒ ☒ ☒ ☒ ☒ ☒ ☒ ☒ ☒ ☒46 Amount of line 44 you want **applied to your 2006 estimated tax**. 46 **125****Amount you owe**47 **Amount you owe**. Subtract line 43 from line 38. For details on how to pay, see page 51. ▶ 47

48 Estimated tax penalty (see page 51). 48

Third party designeeDo you want to allow another person to discuss this return with the IRS (see page 52)? ☒ **Yes**. Complete the following. ☐ **No**

Designee's name

Phone no.

Personal identification

▶ **DANIEL HAWTHORNE**▶ **801-555-2201**

number (PIN) ▶

1 2 4 4 4**Sign here**

Joint return? See page 18. Keep a copy for your records.

Under penalties of perjury, I declare that I have examined this return and accompanying schedules and statements, and to the best of my knowledge and belief, they are true, correct, and accurately list all amounts and sources of income I received during the tax year. Declaration of preparer (other than the taxpayer) is based on all information of which the preparer has any knowledge.

Your signature

Date

Your occupation

Daytime phone number

RETIREDSpouse's signature. If a joint return, **both** must sign.

Date

Spouse's occupation

801-555-5209**Paid preparer's use only**

Preparer's signature

Date

Check if self-employed ☐

Preparer's SSN or PTIN

Firm's name (or yours if self-employed), address, and ZIP code

EIN

Phone no.

2005

TC-40

Rev. 12/05

Fiscal Year

40051

1024

Utah State Income Tax Dollars Fund Education

Amended Return

Utah Individual Income Tax Return

X if deceased

Your Social Security No.

TEST P

BARRELL

400005209

C\O BROTHER BARRELL

8015555209

Spouse's Soc. Sec. No.

25000 HAM AND BACON JUNCTION

PIG TOWN

UT

84013

1 Filing Status - enter code	2 Exemptions - enter number	3 Election Campaign Fund - enter code
<input checked="" type="radio"/> E A = Single B = Head of Household C = Married filing jointly D = Married filing separately E = Qualifying widow(er)	<input type="radio"/> a 1 Yourself <input checked="" type="radio"/> b Spouse ▶ from federal return <input type="radio"/> c 1 Dependents <input checked="" type="radio"/> d Disabled - see Utah instr. <input checked="" type="radio"/> e 2 Total exemptions (add a through d)	C = Constitution Yourself <input type="radio"/> Spouse <input type="radio"/> D = Democrat <input checked="" type="radio"/> N <input type="radio"/> G = Green L = Libertarian P = Personal Choice R = Republican N = No contribution
		Entering a code does not increase your tax or reduce your refund

4 Federal adjusted gross income from federal return ☒ 4 17420.5 State income tax deducted as an itemized deduction on federal form 1040, Schedule A, line 5 ☒ 5

6 Additions to income from form TC-40S, Part 1 6 4466.

7 **Total adjusted income** (add lines 4 through 6) 7 21886.8 Standard or itemized deduction ☒ 8 11000.9 Personal exemptions deduction. Multiply \$2,400 by line 2e ☒ 9 4800.10 One-half of the federal tax ☒ 10 1.11 State tax refund included on line 10 of federal form 1040 ☒ 1112 Retirement exemption/deduction - use TC-40B ☒ 12 7500.Enter X if age 65 or older ☒ **X** Taxpayer ☐ Spouse

13 Other deductions from form TC-40S, Part 2 13

14 **Total deductions** (add lines 8 through 13) 14 23301.15 **Utah 2005 taxable income** (subtract line 14 from line 7) If less than zero, enter zero. ☒ 1516 CALCULATE INCOME TAX ☒ 16b 0.☒ 16a Qualified taxpayers Amount from worksheet

17 FOR NON OR PART-YEAR RESIDENTS ONLY - Attach form TC-40C

Nonresident - home state:

Part-year resident from

to

Enter information below from Utah form TC-40C (divide Box a by Box b to get a ration (decimal) for Box c)

Non or part-year residents

Box a - from Column A, line 32

Box b - from Column B, line 32

Box c - Utah income tax ratio

(Line 16b x Box c)

L

/

=

☒ 17

Utah Income Tax Return - 2005

Taxpayer's last name

BARRELL

Taxpayer's soc. sec. no.

400-00-5209

18 Enter tax (full-year resident, enter tax from line 16b - non or part-year resident, enter tax from line 17) 18 0.

19 Nonrefundable credits from form TC-40S, Part 3 19

20 Subtract line 19 from line 18 (Note: if line 19 is greater than or equal to line 18, enter zero) 20 0.

21 Contributions - add lines 21a through 21f and enter total contributions on line 21

Code	Description	Code	Amount	Sch/Tech Code
01	Utah Nongame Wildlife Fund	21a		
02	Pamela Atkinson Homeless Trust Fund	21b		
03	Kurt Oscarson Children's Organ Transplant Fund	21c		
05	School District & Nonprofit School District Foundation	21d		
06	Utah College of Applied Technology	21e		
07	Uniform School Fund	21f		21
08	Wolf Depredation Fund			

22 AMENDED RETURNS ONLY - previous refund 22

23 Tax from recapture of credits 23

24 Utah use tax 24

25 Total tax, use tax and additions to tax (add lines 20 through 24) 25 0.

26 UTAH TAX WITHHELD (must attach W-2s and/or 1099 forms) 26 0.

27 Credit for Utah income taxes prepaid 27

28 AMENDED RETURNS ONLY - previous payments 28

29 Refundable credits from form TC-40S, Part 4 29

30 Total (add lines 26 through 29) 30 0.

31 Tax Due - if line 25 is greater than line 30, subtract line 30 from line 25. This is the amount you owe. TAX DUE 31

32 Refund - if line 30 is greater than line 25, subtract line 25 from line 30. This is your refund. REFUND 32

33 Enter the amount of refund you want applied to your 2006 taxes. Your refund will be reduced by this amount. 33

34 DIRECT DEPOSIT YOUR REFUND. Complete information below.

☐ Routing number
 ☐ Account number
 ☐ Account type - C or S

Under penalties of perjury, I declare to the best of my knowledge and belief, this return and accompanying schedules reflect my true tax status.

SIGN Your signature
HERE

Date

Spouse's signature

Date

Third Party Designee	Name of designee (if any) you authorize to discuss this return DANIEL HAWTHORNE	Designee's telephone number 8015552201	Designee PIN 12444
Paid Preparer's Section	Preparer's signature	Preparer's telephone number	Preparer's SSN/PTIN
	Firm's name and address		Preparer's EIN



40053

Income Tax Supplemental Schedule

DRAKE SOFTWARE

TC-40S Rev. 12/05

Taxpayer's last name

BARRELL

Taxpayer's soc. sec. no.

400-00-5209

Part 1 - Additions to Income (write the code and amount of each addition to income, see pages 5 and 6)

		• 52	100.
Code	Code		
51 Lump sum distribution	56 Child's income excluded from parent's return	• 54	4000.
52 State taxes allocated from estate/trust	57 Municipal bond interest		
53 Medical Savings Account (MSA)	60 Untaxed Income of a resident trust	• 60	157.
54 Utah Educational Savings Plan (UESP)	61 Untaxed Income of a nonresident trust		
55 Reimbursed adoption expenses		• 61	209.
Total additions to income (add all additions to income and enter total here and on TC-40, line 6)			4466.

Part 2 - Other Deductions (write the code and amount of each other deduction, see pages 7 through 9)

		•
Code	Code	
71 Interest from U.S. Government Obligations	78 Railroad retirement income	•
72 Medical Savings Account (MSA)	79 Equitable adjustments - attach explanation	
73 Utah Educational Savings Plan (UESP)	81 Gains on capital transactions	•
74 Health care insurance premiums	82 Nonresident active duty military pay	
75 Long-term care insurance premiums	83 National Guard/Reserve military pay	•
76 Adoption expenses		•
77 Native American income:		•
Enrollment Number & Tribe - Primary	Secondary	•
Total other deductions (add all other deductions and enter total here and on TC-40, line 13)		

Part 3 - Nonrefundable Credits (write the code and amount of each nonrefundable credit, see pages 10 through 12)

		•
Code	Code	
01 At-home parent	09 Hiring disabled	•
02 Qualified sheltered workshop - enter name below	10 Recycling market	
	11 Tutoring disabled	•
03 Renewable energy systems	12 Research activities	
05 Clean fuel vehicle	13 Research machinery/equipment	•
06 Historic preservation	17 Tax paid to another state (attach TC-40A)	
07 Enterprise zone	19 Live organ donation expenses	•
08 Low-income housing		•
Total nonrefundable credits (add all nonrefundable credits and enter total here and on TC-40, line 19)		

Part 4 - Refundable Credits (write the code and amount of each refundable credit, see pages 14 through 15)

		•
Code	Code	
40 Targeted business tax credit	46 Mineral production withholding	•
41 Special needs adoption credit	47 Agricultural off-highway gas/undyed diesel	
43 Nonresident shareholder's withholding	48 Farm operation hand tools	•
FEIN -		•
Total refundable credits (add all refundable credits and enter total here and on TC-40, line 29)		



Taxpayer's last name

BARRELL

Taxpayer's social security number

400-00-5209

Retirement Income Exemption/Deduction

TC-40B

Rev. 12/05

You qualify to take the retirement income exemption/deduction if (1) you, or your spouse if filing jointly, are age 65 or older at the end of the tax year; or (2) you, or your spouse if filing jointly, are under age 65 and received qualifying taxable retirement income. See pages 6 and 7 of instructions for definition of qualifying retirement income.

1. Age 65 or older - Retirement Income Exemption

Check the "Self" box if age 65 or older.

☒ Self

☐ Spouse

Total boxes checked 1 x \$7,500 =

1 \$ 7,500 00

If filing jointly, check the "Spouse"

box if spouse is age 65 or older.

2. Under age 65 - Retirement Income Deduction (if you, and your spouse if filing jointly, are age 65 or older, skip to line 3)

Line 2a is limited to qualifying taxable retirement income up to \$4,800 per retiree and can only be used by the retiree who earned the income. ATTACH ALL FORMS 1099R, SSA-1099, or other documentation to support your deduction.

	Self	Spouse	
Date of birth ▶			
a. Qualified retirement income -a.	\$	\$	
b. Retirement limitation -b.	\$ 4,800	\$ 4,800	
c. Enter the lesser of a or b for each column. . -c.	\$	\$	
		+	\$
			= 2 \$ 00

Add Self and Spouse amounts on line c. for total.

3. Total (add lines 1 and 2) 3 \$ 7,500 00

4. Adjusted income

a. Enter federal adjusted gross income (form TC-40, line 4) -a.	\$ 17,420
b. Enter any lump-sum distribution amount (form TC-40S, Part 1, code 51) . . . -b.	\$
c. Enter non-taxable interest amount (federal form 1040 or 1040A, line 8b) . . . -c.	\$

Adjusted income (add lines 4a through 4c) 4 \$ 17,420 00

5. Enter: a \$32,000 -- if married filing jointly, head of household, or qualifying widow(er)

b \$16,000 -- if married filing separately

c \$25,000 -- if single

5 32,000 00

Round to nearest whole dollar.

6. Subtract line 5 from line 4 (if less than zero, enter zero) 6 00

7. One-half of line 6 (line 6 divided by 2) 7 00

8. Subtract line 7 from line 3. This is your retirement exemption/deduction. Enter on TC-40, line 12.

Do not enter an amount less than zero. 8 \$ 7,500 00

☐ CORRECTED (if checked)

PAYER'S name, street address, city, state, and ZIP code OUR SHARE BANK & TRUST 72 MARKET PLACE PIG TOWN UT 84013		1 Gross distribution \$ 2,500		OMB No. 1545-0119 2005 Form 1099-R		Distributions From Pensions, Annuities, Retirement or Profit-Sharing Plans, IRAs, Insurance Contracts, etc.	
		2a Taxable amount \$ 2,500					
		2b Taxable amount not determined <input type="checkbox"/>		Total distribution <input type="checkbox"/>			
PAYER'S Federal identification number 52-7754541		RECIPIENT'S identificaton number 400-00-5209		3 Capital gain (included in box 2a) \$		4 Federal income tax withheld \$	Copy B Report this income on your Federal tax return. If this form shows Federal income tax withheld in box 4, attach this copy to your return. This information is being furnished to the Internal Revenue Service.
RECIPIENT'S name TEST P BARRELL Street address (including apt. no.) 25000 HAM AND BACON JUNCTION City, state, and ZIP code PIG TOWN UT 84013		5 Employee contributions or insurance premiums \$		6 Net unrealized appreciation in employer's securities \$			
		7 Distribution Code 7	IRA/SEP/SIMPLE <input checked="" type="checkbox"/>	8 Other \$ %	9b Total employee contributions \$		
Account number (see instructions)		9a Your percentage of total distribution %		10 State tax withheld \$ \$		11 State/Payer's state no. UT	12 State distribution \$ \$
				13 Local tax withheld \$ \$		14 Name of locality	15 Local distribution \$ \$

Form **1099-R**

Department of the Treasury - Internal Revenue Service

☐ CORRECTED (if checked)

PAYER'S name, street address, city, state, and ZIP code WECAN DUETTE LOBBYISTS 1000 BUCKS ST PIG TOWN UT 84013		1 Gross distribution \$ 4,920		OMB No. 1545-0119 2005 Form 1099-R		Distributions From Pensions, Annuities, Retirement or Profit-Sharing Plans, IRAs, Insurance Contracts, etc.	
		2a Taxable amount \$ 4,920					
		2b Taxable amount not determined <input type="checkbox"/>		Total distribution <input type="checkbox"/>			
PAYER'S Federal identification number 52-9081726		RECIPIENT'S identificaton number 400-00-5209		3 Capital gain (included in box 2a) \$		4 Federal income tax withheld \$ 200	Copy B Report this income on your Federal tax return. If this form shows Federal income tax withheld in box 4, attach this copy to your return. This information is being furnished to the Internal Revenue Service.
RECIPIENT'S name TEST P BARRELL Street address (including apt. no.) 25000 HAM AND BACON JUNCTION City, state, and ZIP code PIG TOWN UT 84013		5 Employee contributions or insurance premiums \$		6 Net unrealized appreciation in employer's securities \$			
		7 Distribution Code 7		8 Other \$ %			
		9a Your percentage of total distribution %		9b Total employee contributions \$			
Account number (see instructions)		10 State tax withheld \$		11 State/Payer's state no. UT		12 State distribution \$	
		\$				\$	
		13 Local tax withheld \$		14 Name of locality		15 Local distribution \$	
		\$				\$	

Form **1099-R**

Department of the Treasury - Internal Revenue Service

1040

Interest Listing	
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2005

NAME(S) AS SHOWN ON RETURN
TEST P BARRELL

SSN	400-00-5209
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400-00-5209

[illegible]